September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

ALERE WOMEN'S AND CHILDREN'S HEALTH LLC-MIDLANDS

121 EXECUTIVE CENTER DR STE 106

COLUMBIA, SC 29210-8418 FACILITY #:803-750-0022

BURGESS, KIM PH#: 803-750-0022

Facility Email: FERN.MATTHEWS@ALERE.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0130 / 03/31/2016

Richland / Limited Liability

3200 WINDY HILL RD SE STE 100B

ATLANTA, GA 30339-8504

ALERE HEALTH LLC

Total Counties Served: 13

County/Counties Served: Aiken, Charleston, Dorchester, Lexington, Richland, Newberry, Beaufort, Berkeley, Kershaw, Lancaster,

Fairfield, Georgetown, Colleton

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: IV THERAPY

ALERE WOMEN'S AND CHILDREN'S HEALTH LLC-PIEDMONT

25 WOODS LAKE RD STE 329, GREEN GATE OFFICE PARK

GREENVILLE, SC 29607-6169 FACILITY #:803-750-0022

BURGESS, KAREN PH#: 803-750-0022

Facility Email: FERN.MATTHEWS@ALERE.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0128 / 03/31/2016

Greenville / Limited Liability

3200 WINDY HILL RD SE STE 100B

ATLANTA, GA 30339-8504

ALERE HEALTH LLC

Total Counties Served: 33

County/Counties Served: Abbeville, Allendale, Anderson, Calhoun, Cherokee, Darlington, Dillon, Edgefield, Greenville,

Greenwood, Hampton, Horry, Laurens, Lee, Oconee, Orangeburg, Pickens, Union, Williamsburg, York, Marion, Marlboro, McCormick, Bamberg, Barnwell, Jasper, Florence, Saluda, Spartanburg, Sumter,

Chester, Chesterfield, Clarendon

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: IV THERAPY

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

AMEDISYS HOME HEALTH CARE

HHA-0188 / 01/31/2016

127 E MILL ST

Williamsburg / Limited Liability

KINGSTREE, SC 29556 FACILITY #:843-355-5103

127 E MILL ST

LANGSTON, JENNIFER PH#:

KINGSTREE, SC 29556

Facility Email:

JENNIFER.LAMGSTON@AMEDISYS.COM

GEORGETOWN HOSPITAL HOME HEALTH LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served:

Williamsburg, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Ν

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

AMEDISYS HOME HEALTH OF BEAUFORT

2121 BOUNDARY ST STE 200

BEAUFORT, SC 29902-6812 FACILITY #:843-379-2320

CRAVEN, KAREN L PH#:

Facility Email: 2210@AMEDISYS.COM

2121 BOUNDARY ST STE 200 BEAUFORT, SC 29902-6812

AMEDISYS SC LLC

HHA-0189 / 01/31/2016

Beaufort / Ltd. Liability

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served:

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Beaufort, Jasper

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Other Services:

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September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

AMEDISYS HOME HEALTH OF BLUFFTON

23 PLANTATION PARK DR STE 503

BLUFFTON, SC 29910-6080 FACILITY #:843-815-8088

BARRY, HANK PH#:

Facility Email: HANK.BARRY@AMEDISYS.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0203 / 02/28/2016

Beaufort / Ltd. Liability 23 PLANTATION PARK DR STE 503

BLUFFTON, SC 29910-6080

AMEDISYS SC LLC

Total Counties Served: 3

County/Counties Served:

Hampton, Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Ν

Other Services:

AMEDISYS HOME HEALTH OF CAMDEN

1110 BROAD ST STE B

CAMDEN, SC 29020-3624 FACILITY #:803-713-9774

RAPP, SUZANNE PH#: 803-713-9774

Facility Email:

2216@AMEDISYS.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0194 / 02/28/2016

Kershaw / Ltd. Liability

1110 BROAD ST STE B

CAMDEN, SC 29020-3624

AMEDISYS SC LLC

Phone:

Total Counties Served: 7

County/Counties Served:

Calhoun, Lexington, Orangeburg, Richland, Newberry, Kershaw, Fairfield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Other Services:

September 4, 2015

Satellite Location: WEST COLUMBIA OFFICE

Address: 3227 SUNSET BLVD

STE F101

City: WEST COLUMBIA

State:SC

Zip Code: 29169

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September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

2675 LAKE PARK DR

License#/Expiration County/Ownership Type **Mailing Address** Licensee

AMEDISYS HOME HEALTH OF CHARLESTON

HHA-0172 / 09/30/2016 Charleston / Corporation

NORTH CHARLESTON, SC 29406-9100 FACILITY #:843-553-1263

2675 LAKE PARK DR

ROWLEY, KELLY PH#: 843-553-1263

NORTH CHARLESTON, SC 29406-9100

Facility Email: 2203@AMEDISYS.COM AMEDISYS HOME HEALTH INC OF SOUTH CAROLINA

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 3

County/Counties Served:

Charleston, Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

AMEDISYS HOME HEALTH OF CHARLESTON EAST

HHA-0191 / 01/31/2016 1027 PHYSICIANS DR STE 210 Charleston / Ltd. Liability

CHARLESTON, SC 29414-5352 FACILITY #:843-556-0200

1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352

RITTER-PEACOK, KRISTI L PH#:

AMEDISYS SC LLC

Facility Email: 2207@AMEDISYS.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 5

County/Counties Served: Charleston, Dorchester, Hampton, Berkeley, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: MOUNT PLEASANT OFFICE Phone:

Address: 950 HOUSTON NORTHCUTT BLVD

STE 105

City: MOUNT PLEASANT State:SC Zip Code: 29464-564

Satellite Location: WALTERBORO OFFICE Phone:

Address: 305 ROBERTSON BLVD

City: WALTERBORO State:SC Zip Code: 29488

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

AMEDISYS HOME HEALTH OF CLINTON

210 PHYSICIANS PARK DR STE U

CLINTON, SC 29325-7565 FACILITY #:864-833-3212

SUMNER, WENDY C PH#:

Facility Email:

WENDY.SUMNER@AMEDISYS.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0186 / 01/31/2016

Laurens / Corporation

CLINTON, SC 29325-7565

210 PHYSICIANS PARK DR STE U

AMEDISYS HOME HEALTH INC OF SOUTH CAROLINA

Total Counties Served:

County/Counties Served: Abbeville, Greenville, Greenwood, Laurens

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

Satellite Location: GREENVILLE OFFICE Phone:

Address: 440 ROPER MOUNTAIN RD

STE G-1

City: GREENVILLE State:SC Zip Code: 29615-423

AMEDISYS HOME HEALTH OF CONWAY HHA-0195 / 03/31/2016

176 WACCAMAW MEDICAL PARK CT Horry / Corporation

CONWAY, SC 29526-8965 FACILITY #:843-347-5899 176 WACCAMAW MEDICAL PARK CT

JONES, BRITTANY PH#: 843-347-5899 CONWAY, SC 29526-8965

2222@AMEDISYS.COM AMEDISYS HOME HEALTH INC OF SOUTH CAROLINA Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Horry

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: NURSING

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

AMEDISYS HOME HEALTH OF GEORGETOWN

HHA-0192 / 01/31/2016 Georgetown / Limited Liability

GEORGETOWN, SC 29440-2900 FACILITY #:843-546-1730

2503 HIGHMARKET ST

DAWSON, KATHLEEN H PH#: 843-546-1730

GEORGETOWN, SC 29440-2900

Facility Email:

2503 HIGHMARKET ST

2245@AMEDISYS.COM

GEORGETOWN HOSPITAL HOME HEALTH LLC

Fac. Cont. Email: 2205@AMDISYS.COM

Total Counties Served: 2

County/Counties Served:

Williamsburg, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

AMEDISYS HOME HEALTH OF LEXINGTON

HHA-0190 / 01/31/2016 714 S LAKE DR STE 250 Lexington / Ltd. Liability LEXINGTON, SC 29072-3462 FACILITY #:803-359-2253 714 S LAKE DR STE 250

YOUNG, STEPHANIE PH#: 803-359-2253

LEXINGTON, SC 29072-3462

Facility Email: 2211@AMEDISYS.COM

AMEDISYS SC LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 8

County/Counties Served: Calhoun, Lee, Lexington, Orangeburg, Sumter, Newberry, Edgefield, Richland

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: SUMTER OFFICE Phone: 803-905-5240

Address: 3481 DECLARATION BLVD

City: SUMTER State:SC Zip Code: 29154

Satellite Location: NEWBERRY OFFICE Phone:

Address: 184 COMMERCE DR

City: NEWBERRY State:SC Zip Code: 29108

Satellite Location: ORANGEBURG OFFICE Phone:

Address: 1704 VILLAGE PARK DR

City: ORANGEBURG State:SC Zip Code: 29118

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September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

AMEDISYS HOME HEALTH OF MYRTLE BEACH

1309 PROFESSIONAL DR STE 100

MYRTLE BEACH, SC 29577-5701 FACILITY #:843-916-0931

MELVIN, BECKY M PH#: 843-916-0931

Facility Email: 2246@AMEDISYS.COM
Fac. Cont. Email: 2206@AMEDISYS.COM

HHA-0187 / 01/31/2016 Horry / Limited Liability

1309 PROFESSIONAL DR STE 100

MYRTLE BEACH, SC 29577-5701

GEORGETOWN HOSPITAL HOME HEALTH LLC

Total Counties Served: 1

County/Counties Served: Horry

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

ANMED HEALTH HOME HEALTH AGENCY

1926 MCCONNELL SPRINGS RD

ANDERSON, SC 29621-2642 FACILITY #:864-512-6410

GETSINGER, CHRISTI A PH#: 864-512-6410

Facility Email: CHRISTI.GETSINGER@ANMEDHEALTH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0068 / 02/29/2016

Anderson / Non-Profit Corporation

PO BOX 195

ANDERSON, SC 29622-0195

ANMED HEALTH

Total Counties Served: 1

County/Counties Served: Anderson

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address

Licensee

BEAUFORT-JASPER HOME HEALTH AGENCY

HHA-0017 / 08/31/2015 (Renewal Pending)

719 OKATIE HWY 170N

Beaufort / Non-Profit Corporation

RIDGELAND, SC 29936-8276 FACILITY #:843-987-7400

PO BOX 357

BRANTLEY, KENISHA PH#: 843-987-7400

RIDGELAND, SC 29936-2605

Facility Email:

KBRANTLEY@BJHCHS.ORG

BEAUFORT-JASPER-HAMPTON COMPREHENSIVE HEALTH

Fac. Cont. Email: No Facility Contact Email on Record

SERVICES INC

Ν

Total Counties Served: 2

County/Counties Served:

Beaufort, Jasper

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

BETHEA HOME HEALTH

HHA-0143 / 07/31/2016

157 HOME AVE

Darlington / Non-Profit Corporation

DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867

157 HOME AVE

MCKITTRICK RN, PATRICIA M PH#: 843-393-2867

DARLINGTON, SC 29532-7625

Facility Email:

BSPURLING@SCBMA.COM

SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Fac. Cont. Email: BSPURLING@SCBMA.COM

Total Counties Served: 1

County/Counties Served:

Darlington

Medical Supplies/Appliances/Durable Medical Equipment:

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy:

N Occupational Therapy: N

Med. Social Services: N

Home Health Aid: Y

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

HHA-0218 / 10/31/2015

AUGUSTA, GA 30903-0200

CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA

410 UNIVERSITY PKWY STE 2000

#:803-335-0821 Aiken / Limited Liability
PO BOX 200

AIKEN, SC 29801-6808 FACILITY #:803-335-0821

CAMPBELL, TRACEY L PH#: 803-335-0821

Facility Email: MLROOS@CARESOUTH.COM CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Aiken

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

CARING NEIGHBORS HOME HEALTH HHA-0132 / 06/30/2016

102 US HWY 321 BYP N Fairfield / County

WINNSBORO, SC 29180-9251 FACILITY #:803-635-4210 PO BOX 620

FOSTER, RENIA D PH#: 803-635-4210 WINNSBORO, SC 29180-0620

Facility Email: RENIA.FOSTER@FAIRFIELDMEMORIAL.COM FAIRFIELD MEMORIAL HOSPITAL (BOARD OF TRUSTEES)

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Fairfield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED DIETICIAN

September 4, 2015

Home Health Aid: Y

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

121 E CEDAR ST

License#/Expiration County/Ownership Type Mailing Address Licensee

CAROLINAS HOME HEALTH

HHA-0109 / 12/31/2015 Florence / Limited Liability

FLORENCE, SC 29506-2576 FACILITY #:843-629-6811

121 E CEDAR ST

POSTON, JOE A PH#: 843-629-6811

FLORENCE, SC 29506-2576

JPOSTON@CAROLINASHOSPITAL.COM Facility Email:

Ν

FLORENCE HOME CARE SERVICES LLC

Med. Social Services: Y

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Darlington, Dillon, Marlboro, Florence

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

License Restrictions:

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: SKILLED NURSING

CHESTERFIELD VISITING NURSES SERVICE

HHA-0065 / 08/31/2016

918 CHESTERFIELD HWY

Chesterfield / Corporation

CHERAW, SC 29520-7008 FACILITY #:843-537-3020

PO BOX 813 CHERAW, SC 29520-0813

OLIVER, JULIA PH#: 843-537-3020

Facility Email: JOLIVER@AHCE.NET CHESTERFIELD VISITING NURSES SERVICE INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 3

County/Counties Served:

Darlington, Marlboro, Chesterfield

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N

Med. Social Services: N

Home Health Aid: Y

Other Services: SKILLED NURSING

Medical Supplies/Appliances/Durable Medical Equipment:

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CLARENDON MEMORIAL HOME HEALTH

HHA-0141 / 01/31/2016 Clarendon / District

MANNING, SC 29102-3167 FACILITY #:803-435-4494

619 S MILL ST MANNING, SC 29102-3167

MELTON, DENISE J PH#: 803-435-4494

Facility Email:

619 S MILL ST

DMELTON@CHSYSTEM.ORG

CLARENDON HOSPITAL DISTRICT

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Clarendon

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N

Ν

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

CLEMSON DOWNS HOME HEALTH

HHA-0153 / 05/31/2016

500 DOWNS LOOP

Pickens / Corporation

CLEMSON, SC 29631-2099 FACILITY #:864-654-1155

500 DOWNS LOOP CLEMSON, SC 29631-2099

LEHEUP, JOHN E PH#: 864-654-1155

CARC INC

Facility Email:

SHAUNA-RN@CLEMSONDOWNS.COM

Medical Supplies/Appliances/Durable Medical Equipment:

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served:

Pickens, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N

Med. Social Services: N

Home Health Aid: Y

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

COVENANT PLACE CCRC HOME HEALTH SERVICES

HHA-0209 / 05/31/2016

2825 CARTER RD

Sumter / Non-Profit Corporation

SUMTER, SC 29150-1712 FACILITY #:803-469-7007

2825 CARTER RD

WILSEY, JENNIFER PH#: 803-469-7007

SUMTER, SC 29150-1712

Facility Email:

JWILSEY@COVENANTPLACE.ORG

COVENANT PLACE OF SUMTER INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Sumter, Special Note - RESTRICTED TO RESIDENTS OF COVENANT PLACE OF SUMTER CAMPUS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N

Ν

Med. Social Services: N

Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: HOME HEALTH SERVICES

CYPRESS CLUB HOME HEALTH AGENCY

HHA-0146 / 07/31/2016

20 LADYSLIPPER LN

Beaufort / Corporation

HILTON HEAD ISLAND, SC 29926-1372 FACILITY #:843-689-7017

20 LADYSLIPPER LN

HARRISON, ANN E PH#: 843-689-7017

HILTON HEAD ISLAND, SC 29926-1372

Facility Email:

AHARRISON@THECYPRESS.COM

CYPRESS CLUB INC

Fac. Cont. Email: AHARRISON@THECYPRESS.COM

Total Counties Served:

County/Counties Served:

Beaufort, Special Note - Restricted to Residents of The Cypress Club Only on Hilton Head Island, South

1

Carolina

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N

Medical Supplies/Appliances/Durable Medical Equipment:

Med. Social Services: N

Home Health Aid: Y

Other Services: NURSING

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September 4, 2015

Home Health Aid: Y

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator

1605-C W PALMETTO ST

License#/Expiration County/Ownership Type Mailing Address Licensee

FLORENCE VISITING NURSES SERVICE

HHA-0064 / 01/31/2016 Florence / Corporation

FLORENCE, SC 29501-4198 FACILITY #:843-667-1515

PO BOX 1485

JACKSON-MEEKINS, JONATHAN PH#:

WAYCROSS, GA 31501

Facility Email: JJOHNSON@AHCE.NET

FLORENCE VISITING NURSES SERVICE INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 4

County/Counties Served: Dillon, Lee, Marion, Florence

License Restrictions:

Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

FRANKLIN C FETTER HOME HEALTH AGENCY

HHA-0018 / 12/31/2015

51 NASSAU ST

Charleston / Corporation

CHARLESTON, SC 29403-5500 FACILITY #:843-722-4112

51 NASSAU ST

CORLEY, PAMELA PH#: 843-722-4112

CHARLESTON, SC 29403-5500

Facility Email: PAMELA_CORELY@FETTERHEALTHCARE.ORG

FRANKLIN C FETTER FAMILY HEALTH CENTER INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Charleston

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: NURSES AID

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

GENTIVA HEALTH SERVICES

HHA-0154 / 11/30/2015 Richland / Corporation

2000 CENTER POINT RD STE 2300 COLUMBIA, SC 29210-7318 FACILITY #:803-731-2365

12900 FOSTER ST STE 400

CARSON, ERIN PH#:

OVERLAND PARK, KS 66213-2696

Facility Email:

JANET.COMBS@GENTIVA.COM

CAPITAL CARERESOURCES OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

Ν

County/Counties Served:

Lexington, Richland

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

GENTIVA HEALTH SERVICES-CHARLESTON

HHA-0051 / 08/31/2016 4975 LACROSS RD STE 354 Charleston / Corporation

CHARLESTON, SC 29406-6525 FACILITY #:843-744-1191

OVERLAND PARK, KS 66213-2696

KOLODY, TRACIE M PH#:

Facility Email:

GENTIVA CERTIFIED HEALTHCARE CORPORATION

12900 FOSTER ST STE 400, CORPORATE LICENSURE DEPT

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 3

County/Counties Served: Charleston, Dorchester, Berkeley

JANET.COMBS@GENTIVA.COM

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

HHA-0158 / 01/31/2016

GENTIVA HEALTH SERVICES-COASTAL

HHA-0179 / 11/30/2015 1240 21ST AVE N STE 200 Horry / Corporation

MYRTLE BEACH, SC 29577-7401 FACILITY #:843-448-7060 12900 FOSTER ST STE 400

BLALOCK, JANET PH#: 843-448-7060 OVERLAND PARK, KS 66213-2696

Facility Email: No Facility Email on Record TOTAL CARE HOME HEALTH OF SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 3

County/Counties Served: Horry, Williamsburg, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

GENTIVA HEALTH SERVICES-GREENVILLE

15 BRENDAN WAY STE 250 Greenville / Corporation GREENVILLE, SC 29615-4243 FACILITY #:864-297-5711 12900 FOSTER ST STE 400

REININGER, APRIL N PH#: 864-488-0898 OVERLAND PARK, KS 66213-2696

CAPITAL CARERESOURCES OF SOUTH CAROLINA LLC Facility Email: DEBBIE.LANNEN@GENTIVA.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 8

County/Counties Served: Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Union, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: SPARTANGBURG OFFICE Phone:

Address: 905 E MAIN ST

City: SPARTANBURG State:SC Zip Code: 29302-218

Satellite Location: ANDERSON OFFICE Phone:

Address: 1704 E GREENVILLE ST

City: ANDERSON State:SC Zip Code: 29621-791

Satellite Location: SENECA OFFICE Phone:

Address: 10 ACCOUNTANTS CIR

THE COMMONS

City: SENECA State:SC Zip Code: 29678

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Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

GENTIVA HEALTH SERVICES-UPSTATE

517 CHESNEE HWY STE C & D

GAFFNEY, SC 29341-2709 FACILITY #:864-488-0898

RANDOLPH, TERESA PH#: 864-488-0898

Facility Email: JANET.COMBS@GENTIVA.COM

Fac. Cont. Email: N/A

HHA-0178 / 11/30/2015 Cherokee / Corporation

517 CHESNEE HWY STE C & D

GAFFNEY, SC 29341-2709

TOTAL CARE HOME HEALTH OF NORTH CAROLINA LLC

Total Counties Served:

County/Counties Served: Cherokee, Union, York, Chester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

Satellite Location: UNION OFFICE Phone:

Address: 1261 S DUNCAN BYPASS

City: UNION State:SC Zip Code: 29379

Satellite Location: ROCK HILL OFFICE Phone:

Address: 250 PIEDMONT BLVD

City: ROCK HILL State:SC Zip Code: 29732-183

GHS HOME HEALTH AGENCY HHA-0020 / 06/30/2016

876 W FARIS RD Greenville / District GREENVILLE, SC 29605-4253 FACILITY #:864-455-8140 876 W FARIS RD

WOODS, LANDACE PH#: 864-455-8140 GREENVILLE, SC 29605-4253 PSAWICKI@GHS.ORG **GREENVILLE HEALTH SYSTEM** Facility Email:

Fac. Cont. Email: LWOODS@GHS.ORG

Total Counties Served: 2

County/Counties Served: Greenville, Pickens

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: INTRAVENOUS THERAPY

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

GHS HOME HEALTH AGENCY-OCONEE

HHA-0164 / 09/30/2016

298 MEMORIAL DR

Oconee / Non-Profit Corporation

SENECA, SC 29672-9499 FACILITY #:864-888-8411

298 MEMORIAL DR

WOODS, LANDACE PH#: 864-888-8411

SENECA, SC 29672-9443

Facility Email:

PSAWICKI@GHS.ORG

GREENVILLE HEALTH SYSTEM

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Anderson, Oconee, Pickens

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Ν

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

HEALTH RELATED HOME CARE

HHA-0116 / 12/31/2016

104 W PICKENS ST

Abbeville / County 104 W PICKENS ST

NORRYCE, SHARON D PH#: 864-366-9151

ABBEVILLE, SC 29620-2427

Facility Email:

SNORRYCE@HRHC.NET

ABBEVILLE, SC 29620-2427 FACILITY #:864-366-9151

ABBEVILLE COUNTY MEMORIAL HOSPITAL

Fac. Cont. Email: N/A

Total Counties Served: 5

County/Counties Served:

Abbeville, Greenwood, Laurens, McCormick, Saluda

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: CLINTON OFFICE

Phone: 864-833-1999

Address: 500 PLAZA CIR

STE K

City: CLINTON

Zip Code: 29325

Satellite Location: GREENWOOD OFFICE

Phone:

Address: 301 MAIN ST

STE B

City: GREENWOOD

State:SC

State:SC

Zip Code: 29646

Satellite Location: LAURENS OFFICE

Phone:

Address: 500 PLAZA CIRCLE

City: LAURENS

State:SC

Zip Code: 29360

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

HOME CARE OF HOSPICECARE OF THE PIEDMONT

HHA-0134 / 09/30/2016 408 W ALEXANDER AVE Greenwood / Corporation GREENWOOD, SC 29646-4031 FACILITY #:864-227-9393 408 W ALEXANDER AVE

CORLEY RN, NANCY B PH#: 864-227-9393

GREENWOOD, SC 29646-4031

NCORLEY@HOSPICEPIEDMONT.ORG Facility Email:

HOME CARE OF HOSPICECARE OF THE PIEDMONT INC

Fac. Cont. Email: NCORLEY@HOSPICEPIEDMONT.ORG

Total Counties Served:

County/Counties Served: Abbeville, Greenwood, Laurens, McCormick, Saluda

License Restrictions: FOR THE TERMINALLY ILL ONLY

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Υ Other Services: SKILLED NURSING, SPIRITUAL COUNSELING

HOME CARE OF LANCASTER

901 W MEETING ST STE 201 Lancaster / Limited Liability LANCASTER, SC 29720-6209 FACILITY #:803-286-1472 901 W MEETING ST STE 201

HELMS, RAYMOND E PH#:

LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC

HHA-0050 / 12/31/2015

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Lancaster

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: REGISTERED DIETITION

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

HOME HEALTH SERVICES OF SELF REGIONAL HEALTHCARE

HHA-0049 / 01/31/2016

105 VINECREST CT STE 400

Greenwood / Non-Profit Corporation

GREENWOOD, SC 29646-8031 FACILITY #:864-725-7600

1325 SPRING ST

WHITE, ELIZABETH PH#: 864-725-7600

GREENWOOD, SC 29646-3875

Facility Email: EWHITE@SELFREGIONAL.ORG

SELF MEMORIAL HOSPITAL INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 5

County/Counties Served: Abbeville, Greenwood, Laurens, McCormick, Saluda

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: SKILLED NURSING

HOMECARE OF THE REGIONAL MEDICAL CENTER

HHA-0122 / 01/31/2016

1895 SAINT MATTHEWS RD

Orangeburg / County

ORANGEBURG, SC 29118-2403 FACILITY #:803-395-2600

PO BOX 2352

HILL, DAVID PH#: 803-395-2600

ORANGEBURG, SC 29116-2352

Facility Email: DHILL@REGMED.COM

REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN

COUNTY (BOARD)

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Calhoun, Orangeburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

N

Other Services: SKILLED NURSING

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

Facility Email:

License#/Expiration County/Ownership Type **Mailing Address** Licensee

HOMECHOICE PARTNERS

HHA-0211 / 11/30/2015 160 CONGRESS BLVD STE D Spartanburg / Corporation DUNCAN, SC 29334-8890 FACILITY #:888-865-1110 160 CONGRESS BLVD STE D

NEAL, TONI R PH#: 864-583-8190

DUNCAN, SC 29334-8890 TNEAL@HOMECHOICEPARTNERS.COM HOMECHOICE PARTNERS INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served: Greenville, Laurens, Oconee, Pickens, Union, York, Anderson, Spartanburg, Cherokee

License Restrictions:

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: SKILLED NURSING

INCARE HOME HEALTH HHA-0039 / 02/28/2016 4685 HWY 17 BYP S Horry / Corporation PO BOX 2431

MYRTLE BEACH, SC 29577-6681 FACILITY #:843-293-4614

LEXINGTON, SC 29071-2431 LIPPERT, ROBERT T PH#: 843-293-4614 INCARE HOME HEALTH INC Facility Email: LICENSING@MSA-CORP.COM

Fac. Cont. Email: BLIPPERT@MSA-CORP.COM

Total Counties Served: 2

County/Counties Served: Horry, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: GEORGETOWN OFFICE Phone:

Address: 107 QUEEN ST

UNIT A

City: GEORGETOWN Zip Code: 29440-363 State:SC

Satellite Location: NORTH MYRTLE BEACH OFFICE Phone:

Address: 106 HWY 17 S

SUNDIAL CENTER

City: N MYRTLE BEACH State:SC Zip Code: 29582

Satellite Location: FLORENCE OFFICE Phone: 843-665-8135

Address: 1402 D MEADORS FARM ROAD

City: FLORENCE State:SC Zip Code: 29505-278

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SCDHEC Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

Satellite Location: CONWAY OFFICE

Address: 1261 HWY 501 E

STE C

City: CONWAY

Phone:

State:SC Zip Code: 29526

INTERIM HEALTHCARE

3870 LEEDS AVE STE 104

NORTH CHARLESTON, SC 29405-7493 FACILITY #:843-569-5510 THARP, PAULA S PH#: 843-569-5510

Facility Email:

PTHARP@INTERIMHEALTHCARE.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0208 / 03/31/2016

Charleston / Limited Liability 3870 LEEDS AVE STE 104

NORTH CHARLESTON, SC 29405-7493

LOWCOUNTRY NURSING GROUP LLC

Total Counties Served: 4

County/Counties Served: Berkeley, Charleston, Dorchester, Beaufort

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: PEDIATRIC HOME HEALTH 0-18 YOA

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

16 HYLAND RD

License#/Expiration County/Ownership Type Mailing Address Licensee

INTERIM HEALTHCARE OF GREENVILLE

HHA-0057 / 06/30/2016 Greenville / Corporation

GREENVILLE, SC 29615-5756 FACILITY #:864-627-1200

16 HYLAND RD

Phone:

MCDUFF, RICHARD PH#: 864-627-1200

GREENVILLE, SC 29615-5756

Facility Email: RICK.MCDUFF@INTERIMCARES.COM INTERIM HEALTHCARE OF GREENVILLE INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served: Anderson, Cherokee, Greenville, Oconee, Pickens, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services: SKILLED NURSING

Satellite Location: ANDERSON OFFICE

Address: 2001 E GREENVILLE STREET

City: ANDERSON State:SC Zip Code: 29621

Satellite Location: GAFFNEY OFFICE Phone:

Address: 424 HYATT ST

BLDG 1 STE A

City: GAFFNEY State:SC Zip Code: 29341

Satellite Location: DUNCAN OFFICE Phone:

Address: 155 DEACON TILLER CT

City: DUNCAN State:SC Zip Code: 29334

Satellite Location: EASLEY OFFICE Phone:

Address: 810 POWDERSVILLE RD

STE B

City: EASLEY State:SC Zip Code: 29642

Satellite Location: SENECA OFFICE Phone:

Address: 125 EAGLES NEST DRIVE

STE C

City: SENECA State:SC Zip Code: 29678

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

INTERIM HEALTHCARE OF ROCK HILL

154 AMENDMENT AVE STE 106

ROCK HILL, SC 29732-3156 FACILITY #:803-324-4166

WEBB, MARGARET D PH#: 803-324-4166

Facility Email: TERRIPILKINGTON@INTERIM-MGI.COM

Fac. Cont. Email: TERRIPILKINGTON@INTERIM-MGI.COM

HHA-0169 / 11/30/2015 York / Corporation

2526 WARD BLVD

WILSON, NC 27893-1600

INTERIM HEALTHCARE OF THE TRIAD INC

Total Counties Served:

County/Counties Served: York

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

INTREPID USA HEALTHCARE SERVICES

2694 LAKE PARK DR 1ST FLOOR

NORTH CHARLESTON, SC 29406-9826 FACILITY #:843-569-3516

SCHUMACHER, JEANETTE PH#:

JEANETTE.SCHUMACHER@INTREPIDUSA.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0180 / 06/30/2016

Charleston / Corporation

4055 VALLEY VIEW LN STE 500

DALLAS, TX 75244-5048 FC OF SOUTH CAROLINA INC

Total Counties Served: 6

County/Counties Served: Allendale, Charleston, Dorchester, Berkeley, Georgetown, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: WALTERBORO OFFICE

Phone:

Address: 302 MEDICAL PARK DRIVE SUITE 215

State:SC City: WALTERBORO Zip Code: 29488

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

ISLAND HEALTH CARE

HHA-0111 / 02/29/2016 Jasper / Corporation

300 NEW RIVER PKWY, STE 7

PO BOX 8011

HARDEEVILLE, SC 29927-4450 FACILITY #:843-208-3660

BOLCH, ELLEN B PH#: 843-208-3660

SAVANNAH, GA 31412-8011

Facility Email: MHITT@THAGROUP.ORG ISLAND HEALTH CARE INC

Fac. Cont. Email: EBOLCH@THAGROUP.ORG

Total Counties Served:

County/Counties Served: **Beaufort**

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Ν

Home Health Aid: Y

Other Services:

Medical Supplies/Appliances/Durable Medical Equipment:

Phone:

Address: 1211 NEW CASTLE ST

Satellite Location: BEAUFORT OFFICE

STE C

City: BEAUFORT

State:SC Zip Code: 29902

KERSHAWHEALTH HOME HEALTH

HHA-0080 / 07/31/2016

124 BATTLESHIP RD

Kershaw / County 1315 ROBERTS RD

CAMDEN, SC 29020 FACILITY #:803-425-1182

CAMDEN, SC 29020

PH#:

1

AMYW@KERSHAWHEALTH.ORG Facility Email:

KERSHAWHEALTH (BOARD OF TRUSTEES)

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

License Restrictions:

Other Services:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Kershaw

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration **County/Ownership Type** Mailing Address Licensee

LAUREL CREST HOME HEALTH AGENCY

HHA-0210 / 06/30/2016

100 JOSEPH WALKER DR

Lexington / Non-Profit Corporation

WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370

100 JOSEPH WALKER DR

SMITH, DANIEL T PH#: 803-796-0370

WEST COLUMBIA, SC 29169-6939

Facility Email:

D.SMITH@LAUREL-CREST.COM

FPCRC INC

Fac. Cont. Email: No Facility Contact Email on Record

County/Counties Served:

Total Counties Served: 1

Lexington

License Restrictions: RESTRICTED TO RESIDENTS OF LAUREL CREST CAMPUS ONLY.

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

LIBERTY HOME CARE AIKEN

HHA-0196 / 08/31/2016

1307 E PINE LOG RD STE B

Aiken / Ltd. Liability

1

AIKEN, SC 29803-9695 FACILITY #:803-643-0001

1307 E PINE LOG RD STE B

ARMSTRONG, KIMBERLY PH#: 803-643-0001

AIKEN, SC 29803-9695

Facility Email:

KARMASTRONG@LIBERTYHOMECARE.COM

LIBERTY HOMECARE AND HOSPICE LLC

Fac. Cont. Email: No Facility Contact Email on Record

Aiken

Total Counties Served:

County/Counties Served:

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Other Services:

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September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator

405 E MAIN ST

License#/Expiration County/Ownership Type Mailing Address Licensee

LIBERTY HOME CARE-BENNETTSVILLE

HHA-0159 / 12/31/2015 Marlboro / Ltd. Liability

BENNETTSVILLE, SC 29512-3111 FACILITY #:843-479-8711

405 E MAIN ST

DOOLEY, CHERYL J PH#: 843-347-5661

BENNETTSVILLE, SC 29512-3111

Facility Email: CDOOLEY@LIBERTYHOMECARE.COM

LIBERTY HOME CARE LLC

Fac. Cont. Email: TBROOKS@HEALTHKEEPERZ.COM

Total Counties Served: 1

County/Counties Served: Marlboro

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

LIBERTY HOME CARE-MYRTLE BEACH

HHA-0163 / 12/31/2015

1293 PROFESSIONAL DR STE C

Horry / Ltd. Liability

MYRTLE BEACH, SC 29577-5754 FACILITY #:843-839-2273 WEATHERWAX, TRACI PH#:

1293 PROFESSIONAL DR STE C MYRTLE BEACH, SC 29577-5754

Facility Email: TWEATHERWAX@LIBERTYHOMECARE.COM

LIBERTY HOME CARE LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Horry

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MCLEOD HOME HEALTH

HHA-0085 / 05/31/2016

300 S DARGAN ST

Florence / Non-Profit Corporation

FLORENCE, SC 29506-2537 FACILITY #:843-777-3050

300 S DARGAN ST

THIGPEN, TRACIE PH#:

FLORENCE, SC 29506-2537

Facility Email:

TTHIGPEN@MCLEADHEALTH.ORG

MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 5

County/Counties Served:

Darlington, Dillon, Lee, Marion, Florence

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N

Ν

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

METHODIST MANOR HOME HEALTH

HHA-0207 / 02/28/2015 (Renewal Pending)

2100 TWIN CHURCH RD

Florence / Non-Profit Corporation

FLORENCE, SC 29501-8200 FACILITY #:843-664-0700

2100 TWIN CHURCH RD

TABOR, TERESSA L PH#: 843-664-0700

FLORENCE, SC 29501-8200

TTABOR@METHODIST-MANOR.COM Facility Email:

UNITED METHODIST MANOR OF THE PEE DEE

Fac. Cont. Email: No Facility Contact Email on Record

Medical Supplies/Appliances/Durable Medical Equipment:

Total Counties Served:

County/Counties Served:

Florence

License Restrictions: RESTRICTED TO CCRC RESIDENTS OF THE METHODIST MANOR RETIREMENT COMMUNITY

1

Physical Therapy: N Speech Therapy: N Occupational Therapy: N

Med. Social Services: N Home Health Aid: Y

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

NEIGHBORS CARE HOME HEALTH AGENCY AN AMEDISYS COMPANY

1645 J A COCHRAN BYP STE I

CHESTER, SC 29706-3101 FACILITY #:803-581-6775

GATLIFF, LISA PH#: 803-581-6775

Facility Email: 2226@AMEDISYS.COM

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0198 / 08/31/2016

Chester / Ltd. Liability

1645 J A COCHRAN BYP STE I CHESTER, SC 29706-3101

AMEDISYS SC LLC

Total Counties Served:

County/Counties Served: License Restrictions:

Chester

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

NHC HOMECARE-AIKEN

Facility Email:

690 MEDICAL PARK DR STE 200

AIKEN, SC 29801-5385 FACILITY #:803-643-1701

GRIFFIS, SARAH PH#: 803-643-1701

Fac. Cont. Email: No Facility Contact Email on Record

HHA-0181 / 06/30/2016

Aiken / Limited Liability Limited Partnership

PO BOX 3636

NHC/OP LP

1

AIKEN, SC 29802-3636

County/Counties Served: **Aiken**

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Total Counties Served:

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

NHC@NHCHOMECAREAIKEN.COM

Other Services: DIETARY CONSULTATION

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

NHC HOMECARE-GREENWOOD

HHA-0182 / 06/30/2016

315 W ALEXANDER AVE

Greenwood / Limited Liability Limited Partnership

GREENWOOD, SC 29646-4009 FACILITY #:864-229-9888

PO BOX 1708

HAMMERSMITH, MARY PH#: 864-229-9888

GREENWOOD, SC 29648-1708

Facility Email:

NHC@NHCHOMECAREGREENWOOD.COM

NHC/OP LP

Fac. Cont. Email: No Facility Contact Email on Record

County/Counties Served: Greenwood

License Restrictions:

Total Counties Served:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Ν

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: DIETARY CONSULTATION

NHC HOMECARE-LAURENS

HHA-0183 / 06/30/2016

700 PLAZA CIR STE O

Laurens / Limited Liability Limited Partnership

CLINTON, SC 29325-7556 FACILITY #:864-833-2368

PO BOX 309

HOPKINS, GREG PH#: 803-481-3131

LAURENS, SC 29360-0309

NHC@NHCHOMECARELAURENS.COM Facility Email:

NHC/OP LP

2

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Greenville, Laurens

License Restrictions:

Physical Therapy: Y Speech Therapy: Y

Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Other Services: DIETARY CONSULTATION

Satellite Location: GREENVILLE OFFICE

Phone: 864-289-9982

Address: 111 SMITH HINES ROAD, SUITE L

City: GREENVILLE

State:SC

Zip Code: 29607

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address

Licensee

NHC HOMECARE-LOW COUNTRY

HHA-0138 / 04/30/2016 Dorchester / Limited Liability

109 BURTON AVE STE D

SUMMERVILLE, SC 29485-8117 FACILITY #:843-851-0999

PO BOX 1398

FLYNN, RICKY PH#: 843-851-0999

MURFREESBORO, TN 37133-1398

Facility Email:

DGIET@NHCHOMECARELOWCOUNTRY.COM

NHC HOMECARE-SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Ν

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: DIETARY CONSULTATION

NHC HOMECARE-MIDLANDS

HHA-0151 / 04/30/2016

3229 SUNSET BLVD STE N

Lexington / Limited Liability

PO BOX 3876

STERNENBERG, JASON PH#: 803-939-0266

JSTERNENBERG@NHCHOMECAREMIDLANDS.COM

WEST COLUMBIA, SC 29171-3876 NHC HOMECARE-SOUTH CAROLINA LLC

Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

WEST COLUMBIA, SC 29169-3202 FACILITY #:803-939-0266

Total Counties Served:

County/Counties Served:

License Restrictions:

Lexington, Richland

Physical Therapy: Y Speech Therapy: Y

Occupational Therapy: Y

2

Med. Social Services: Y

Home Health Aid: Y

Other Services: DIETARY CONSULTATION

Medical Supplies/Appliances/Durable Medical Equipment:

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

NHC HOMECARE-PIEDMONT

HHA-0099 / 04/30/2016 York / Limited Liability

1674 CRANIUM DR STE 101

ROCK HILL, SC 29732-3568 FACILITY #:803-325-1455

PO BOX 2525

BRYANT, DONNA N PH#: 803-325-1455

ROCK HILL, SC 29732-4525

Facility Email:

NHC@NHCHOMECAREPIEDMONT.COM

NHC HOMECARE-SOUTH CAROLINA LLC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served: York License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Ν

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: DIETARY CONSULTATION

OAKS HOME HEALTH

HHA-0200 / 01/31/2016

1000 METHODIST OAKS DR

Orangeburg / Non-Profit Corporation

ORANGEBURG, SC 29115-1813 FACILITY #:803-534-1212

PO BOX 327

1

HUDSON, BRANDY RENEE PH#: 803-534-1212

ORANGEBURG, SC 29116-0327

TERESA.VALLENTINE@THEOAKSSC.COM Facility Email:

METHODIST OAKS INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Orangeburg, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Medical Supplies/Appliances/Durable Medical Equipment:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

PALLIATIVE CARE OF THE LOWCOUNTRY

HHA-0117 / 09/30/2016

7 PLANTATION PARK DR UNIT 4

Beaufort / Non-Profit Corporation

PO BOX 3827

BLUFFTON, SC 29910 FACILITY #:843-706-4094

BLUFFTON, SC 29910-3827

Facility Email:

BRASINGTON RN, JENNY PH#: 843-706-2296 INFO@HOSPICECARELC.ORG

HOSPICE CARE OF THE LOWCOUNTRY INC

Fac. Cont. Email: JBRASINGTON@HOSPICECARELC.ORG

Total Counties Served: 2

County/Counties Served:

Beaufort, Jasper, Special Note - RESTRICTED TO RESIDENTS WHO ARE TRERMINALLY ILL AS

DEFINED IN REGULATION 61-78

License Restrictions: RESTRICTED TO RESIDENTS WHO ARE TERMINALLY ILL AS DEFINED IN REGULATION 61-78

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

PALMETTO HEALTH HOMECARE

HHA-0148 / 02/28/2016

1400 PICKENS ST

Richland / Non-Profit Corporation

COLUMBIA, SC 29201-3465 FACILITY #:803-296-3100

PO BOX 7275

KNIGHT, HELEN HOLLY PH#: 803-296-3100

COLUMBIA, SC 29202-7275 PALMETTO HEALTH

Facility Email:

HOLLY.KNIGHT@PALMETTOHEALTH.ORG. Fac. Cont. Email: HOLLY.KNIGHT@PALMETTOHEALTH.ORG.

Total Counties Served: 2

County/Counties Served:

Lexington, Richland

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: CHAPLAINEY, DIETARY AND ENTEROSTOMAL THERAPIST

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

PHC HOME HEALTH

HHA-0084 / 04/30/2016 1923-D MAYBANK HWY Charleston / Corporation CHARLESTON, SC 29412-2115 FACILITY #:843-762-3601 1923-D MAYBANK HWY CHARLESTON, SC 29412

DURRENCE, HUGH D PH#: 843-762-3601

HEDGEMARK BRENTWOOD MEDICAL SERVICES INC

Facility Email: LORIWOOD@PHCHEALTH.COM Fac. Cont. Email: LORIWOOD@PHCHEALTH.COM

Total Counties Served:

County/Counties Served: Charleston

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

PRESBYTERIAN COMMUNITIES OF SC HOME HEALTH AGENCY

2817 ASHLAND RD Lexington / Non-Profit Corporation

COLUMBIA, SC 29210-5009 FACILITY #:803-772-5885 2817 ASHLAND RD

BEACH, KENDA S PH#:

COLUMBIA, SC 29210-5009

HHA-0212 / 12/31/2015

RFIELDS@PRESHOMESC.ORG PRESBYTERIAN HOME OF SOUTH CAROLINA INC Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served: Berkeley, Dorchester, Laurens, Lexington, Pickens, Florence, Special Note - Berkeley, Dorchester,

Florence, Laurens, Lexington & Pickens CCRC campus residents only

License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY CAMPUSES ONLY IN 6 COUNTIES AS LISTED

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

Satellite Location: CLINTON BRANCH Phone:

Address: 801 MUSGROVE ST

City: CLINTON State:SC Zip Code: 29325

Satellite Location: COLUMBIA BRANCH Phone:

Address: 700 DAVEGA DR

City: LEXINGTON State:SC Zip Code: 29073-969

Satellite Location: FLORENCE BRANCH Phone:

Address: 2350 W LUCAS ST

City: FLORENCE State:SC Zip Code: 29501

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SCDHEC September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

Phone:

HHA-0214 / 04/30/2016

Satellite Location: FOOTHILLS BRANCH

Address: 205 BUD NALLEY DR

City: EASLEY State:SC Zip Code: 29642

Satellite Location: SUMMERVILLE BRANCH Phone:

Address: 201 W 9TH NORTH ST

City: SUMMERVILLE State:SC Zip Code: 29483-672

PRUITTHEALTH HOME HEALTH-LOW COUNTRY

1605 NORTH ST Beaufort / Corporation

BEAUFORT, SC 29902-4815 FACILITY #:843-322-0297 1605 NORTH ST

WILLIAMS, LAINE PH#: 843-322-0297 BEAUFORT, SC 29902-4815

Facility Email: BWILLIS@PRUITTHEALTH.COM PRUITTHEALTH HOME HEALTH INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 2

County/Counties Served: Aiken, Beaufort

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

ROLLING GREEN VILLAGE HOME HEALTH AGENCY

HHA-0213 / 12/31/2015

1 HOKE SMITH BLVD

Greenville / Non-Profit Corporation

GREENVILLE, SC 29615-5308 FACILITY #:864-987-9800

1 HOKE SMITH BLVD OFC

BENSON, ROBERT J PH#: 864-580-5660

GREENVILLE, SC 29615-5399

Facility Email: ROBERTB@ROLLINGGREENVILLAGE.COM

ROLLING GREEN VILLAGE

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served: License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY AT ROLLING GREEN VILLAGE RESIDENTS ONLY.

Greenville

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: HOME HEALTH AGENCY FOR RGC RESIDENTS ONLY

ROPER-ST FRANCIS HOME HEALTH CARE

HHA-0062 / 12/31/2015

1483 TOBIAS GADSON BLVD STE 208

Charleston / Non-Profit Corporation

CHARLESTON, SC 29407-4796 FACILITY #:843-402-7000

1483 TOBIAS GADSON BLVD STE 208 CHARLESTON, SC 29407-4796

MELLO, BONNIE C PH#: 843-402-7000

ROPER HOSPITAL INC

Facility Email:

BONNIE.MELLO@RSFH.COM

Fac. Cont. Email: ROPERSAINTFRANCIS.COM

Total Counties Served: 3

County/Counties Served:

Charleston, Dorchester, Berkeley

License Restrictions:

Physical Therapy: Y

Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: REGISTERED DIETITIAN/CDE; CERTIFIED WOUND AND OSTOMY NURSES; TELEMONITORING

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

SC DHEC LOW COUNTRY HOME HEALTH SERVICES

HHA-0011 / 07/31/2016

219 S LEMACKS ST

Colleton / State

WALTERBORO, SC 29488-4374 FACILITY #:843-549-6855

PO BOX 229

NOONWELL, OODITT

ROCKWELL, JUDITH E PH#: 843-549-6855 WALTERBORO, SC 29488-0229

Facility Email:

ROCKWEJ@DHEC.SC.GOV

SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

Fac. Cont. Email: ROCKWEJ@DHEC.SC.GOV

Total Counties Served: 11

County/Counties Served:

Allendale, Calhoun, Charleston, Dorchester, Hampton, Orangeburg, Bamberg, Beaufort, Berkeley,

Jasper, Colleton

License Restrictions:

Physical Therapy: Y

Speech Therapy: N Occupational Therapy: Y

Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: NORTH CHARLESTON-OFFICE

Phone: 843-953-2450

Address: 4050 BRIDGEVIEW DRIVE

City: CHARLESTON

State:SC

Zip Code: 29405

Satellite Location: VARNILLE-OFFICE

Phone: 803-943-4649

Address: 531 CAROLINA AVE

City: VARNVILLE

State:SC

Zip Code: 29944

Satellite Location: ORANGEBURG-OFFICE

Phone: 803-268-5734

Address: 1550 CAROLINA AVENUE

City: ORANGEBURG

State:SC

Zip Code: 29115

SC DHEC MIDLANDS HOME HEALTH SERVICES

HHA-0040 / 09/30/2015

2111 WILSON RD

Newberry / State PO BOX 270

NEWBERRY, SC 29108-1603 FACILITY #:803-276-5818

WINDLODO OO OO

COOK, DEANN PH#:

WINNSBORO, SC 29180-0270

Facility Email: MA

MATTOXD@DHEC.SC.GOV

SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 12

County/Counties Served:

Aiken, Edgefield, Lexington, Richland, York, Newberry, Barnwell, Kershaw, Lancaster, Fairfield, Saluda,

Chester

License Restrictions:

Physical Therapy: Y Speech Therapy:

N Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Other Services:

Satellite Location: BARNWELL OFFICE

Phone: 803-541-1190

Address: 11015 ELLENTON STREET

City: BARNWELL

State:SC

Zip Code: 29812

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SCDHEC Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

Satellite Location: LANCASTER OFFICE Phone:

Address: 1822 PAGELAND HIGHWAY

City: LANCASTER State:SC Zip Code: 29720

SC DHEC PEE DEE HOME HEALTH SERVICES HHA-0009 / 09/30/2015

1705 W EVANS ST Florence / State
FLORENCE, SC 29501-3331 FACILITY #:843-661-4762 1705 W EVANS ST

VANN, LINDA G PH#: 843-661-4762 FLORENCE, SC 29501-3331

Facility Email: VANNLG@DHEC.SC.GOV SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

Fac. Cont. Email: VANNLG@DHEC.SC.GOV

Total Counties Served: 12

County/Counties Served: Darlington, Dillon, Horry, Lee, Williamsburg, Marion, Marlboro, Florence, Georgetown, Sumter,

Chesterfield, Clarendon

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services: REGISTERED NURSE

Satellite Location: CONWAY OFFICE Phone:

Address: 1931 INDUSTRIAL PARK ROAD

City: CONWAY State:SC Zip Code: 29526

Satellite Location: KINGSTREE OFFICE Phone:

Address: 520 THURGOOD MARSHALL HIGHWAY

City: KINGSTREE State:SC Zip Code: 29556

Satellite Location: CHESTERFIELD COUNTY OFFICE Phone: 843-623-2206

Address: 203 N PAGE ST

City: CHESTERFIELD State:SC Zip Code: 29709

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Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

Satellite Location: MANNING OFFICE Phone: 843-435-4355

Address: 110 E BOYCE ST

City: MANNING State:SC Zip Code: 29102

Satellite Location: DILLON COUNTY OFFICE Phone: 843-774-1577

Address: 910 HWY 301 N

City: DILLON State:SC Zip Code: 29536

Satellite Location: BISHOPVILLE OFFICE Phone: 803-484-4180

Address: 810 BROWN ST

City: BISHOPVILLE State:SC Zip Code: 29010

SC DHEC UPSTATE HOME HEALTH SERVICES HHA-0001 / 09/30/2015

220 MCGEE RD, ANDERSON CTY HEALTH DEPT Anderson / State

ANDERSON, SC 29625-2147 FACILITY #:864-260-5617 220 MCGEE RD, ANDERSON CTY HEALTH DEPT

GUY, HARRIET PH#: ANDERSON, SC 29625-2147

Facility Email: GUYHB@DHEC.SC.GOV SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 11

County/Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Union, McCormick,

Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: PICKENS OFFICE Phone: 864-898-5839

Address: 200 MCDANIEL AVENUE

City: PICKENS State:SC Zip Code: 29671

Satellite Location: SPARTANBURG OFFICE Phone: 864-596-3320

Address: 151 EAST WOOD STREET

City: SPARTANBURG State:SC Zip Code: 29303

Satellite Location: CLINTON OFFICE Phone:

Address: 93 HUMAN SERVICE RD

City: CLINTON State:SC Zip Code: 29325

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September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SEA ISLAND HOME HEALTH

HHA-0025 / 04/30/2016

3627 MAYBANK HWY

Charleston / Non-Profit Corporation

JOHNS ISLAND, SC 29455-4836 FACILITY #:843-559-3190

3627 MAYBANK HWY

RUCKER, TUMIKO PH#: 843-768-9166

JOHNS ISLAND, SC 29455-4836

Facility Email:

TMTRUCKER9@GMAIL.COM

SEA ISLAND COMPREHENSIVE HEALTH CARE CORPORATION

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Charleston, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Ν

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: SKILLED NURSING

SEABROOK WELLNESS AND HOME HEALTH CARE

HHA-0173 / 11/30/2015

300 WOODHAVEN DR

Beaufort / Non-Profit Corporation

HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747

300 WOODHAVEN DR OFC

LEE, ROBERT M PH#: 843-842-3747

HILTON HEAD ISLAND, SC 29928-7512

RLEE@THESEABROOK.COM

SEABROOK OF HILTON HEAD INC

Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Medical Supplies/Appliances/Durable Medical Equipment:

Total Counties Served:

County/Counties Served:

Beaufort, Special Note - SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT

1

License Restrictions: SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SOUTH CAROLINA HOMECARE

HHA-0152 / 07/31/2016 Richland / Corporation

140 STONERIDGE DR STE 620

COLUMBIA, SC 29210-8258 FACILITY #:803-343-5100 PO BOX 51266

BUCKLEY, KAREN S PH#: 803-343-5100

LAFAYETTE, LA 70505-1266

Facility Email:

KAREN.BUCKLEY@LHCGROUP.COM

Fac. Cont. Email: No Facility Contact Email on Record

LHCG XLI LLC

Total Counties Served: 2

County/Counties Served:

Richland, Sumter

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Ν

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

SPARTANBURG MEDICAL CENTER HOME HEALTH

120 HEYWOOD AVE STE 300

HHA-0038 / 09/30/2016 Spartanburg / District

1

SPARTANBURG, SC 29302-1211 FACILITY #:864-560-3900

120 HEYWOOD AVE STE 300

OSBORNE RN, PHYLLIS F PH#: 864-560-3900

SPARTANBURG, SC 29302-1211

POSBORNE@SRHS.COM Facility Email:

SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC

Fac. Cont. Email: POSBORNE@SRHS.COM

Total Counties Served:

County/Counties Served:

Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Other Services: SKILLED NURSING

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September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

ST FRANCIS HOSPITAL HOME CARE

HHA-0167 / 12/31/2015 10 PATEWOOD DR BLDG 6 STE 300 Greenville / Corporation

GREENVILLE, SC 29615-6341 FACILITY #:864-233-5300 10 PATEWOOD DR BLDG 6 STE 300

GREENVILLE, SC 29615-6341 FICICCHY, TERI PH#: ST FRANCIS HOSPITAL INC Facility Email: TERESA_FICICCHY@BSHSI.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served: Anderson, Greenville, Pickens, Spartanburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services: CHAPLAIN SERVICES

STILL HOPES HOME HEALTH HHA-0199 / 12/31/2015 1 STILL HOPES DR Lexington / Corporation

WEST COLUMBIA, SC 29169-7164 FACILITY #:803-223-6172 PO BOX 2959

NASSIF, ELIZABETH A PH#: 803-223-6172 WEST COLUMBIA, SC 29171-2959

ENASSIF@STILLHOPES.ORG SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served: 1

County/Counties Served: Lexington, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility Location Street Location City, State Administrator

1950 BUSH RIVER RD

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

TRI-COUNTY HOME HEALTH CARE & SERVICES

HHA-0026 / 12/31/2015 Lexington / Corporation

COLUMBIA, SC 29210-6800 FACILITY #:803-561-7680

PO BOX 2431

MILLING, JO PH#: 803-561-7680

LEXINGTON, SC 29071-2431

Facility Email: JMILLING@MSA-CORP.COM

TRI-COUNTY HOME HEALTH CARE & SERVICES INC

Fac. Cont. Email: JMILLING@MSA-CORP.COM

Total Counties Served: 5

County/Counties Served: Aiken, Lexington, Richland, Saluda, Sumter

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: N

Other Services:

Satellite Location: AIKEN OFFICE Phone: 803-641-1127

Address: 2130 WOODSIDE EXECUTIVE COURT

City: AIKEN State:SC Zip Code: 29803

Satellite Location: UNION OFFICE Phone: 864-427-8322

Address: 101 SOUTH BOYCE ST

STE B

City: UNION

State:SC Zip Code: 29379

Satellite Location: AIKEN OFFICE Phone:

Address: 186 FABIAN DIVE

City: AIKEN State:SC Zip Code: 29803

Satellite Location: SUMTER OFFICE Phone:

Address: 2560 TAHOE DRIVE

City: SUMTER State:SC Zip Code: 29150

Satellite Location: BATESBURG OFFICE Phone:

Address: 120 W CHURCH ST

STE D

City: BATESBURG State:SC Zip Code: 29006

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

TRINITY HOME SERVICES HOME HEALTH

690 MEDICAL PARK DR STE 400

HHA-0197 / 10/31/2015 Aiken / Ltd. Liability

AIKEN, SC 29801-6348 FACILITY #:803-641-8220

690 MEDICAL PARK DR STE 400

KEATING RN, JULIE PH#: 803-641-8220 Facility Email: JULIE_KEATING@CHS.NET AIKEN, SC 29801-6348

Fac. Cont. Email: JULIE_KEATING@CHS.NET

CSRA HOLDINGS LLC

Total Counties Served:

County/Counties Served:

Aiken, Edgefield, Barnwell

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Home Health Aid: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Ν

Other Services: SKILLED NURSING

TUOMEY HOME HEALTH

HHA-0175 / 02/28/2016

500 PINEWOOD RD STE 2

Sumter / Non-Profit Corporation

SUMTER, SC 29154-6197 FACILITY #:803-773-4663

500 PINEWOOD RD STE 2

PRICE, KIMBERLY J PH#: 803-773-4663

SUMTER, SC 29154-6197

KIMBERLY.PRICE@TUOMEY.COM Facility Email:

TUOMEY

3

Fac. Cont. Email: KIMBERLY.PRICE@TOUMEY.COM

Total Counties Served:

County/Counties Served:

Lee, Sumter, Clarendon, Special Note - Sumter County-General Home Health

License Restrictions: SUMTER, LEE & CLARENDON COUNTIES-HOME HEALTH FOR TERMINALLY ILL ONLY

Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: NUTRITIONAL COUNSELING, NURSING

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

UNIVERSITY HOME HEALTH NORTH AUGUSTA

HHA-0137 / 10/31/2015 106 E MARTINTOWN RD UNIT B Aiken / Corporation

NORTH AUGUSTA, SC 29841-3425 FACILITY #:803-278-0770

106 E MARTINTOWN RD UNIT B HARDEN RN, MARY J PH#: 803-278-0770 NORTH AUGUSTA, SC 29841-3425 Facility Email: MHARDEN@UH.ORG UNIVERSITY HEALTH SERVICES INC

Fac. Cont. Email: MHARDEN@UH.ORG

Total Counties Served:

County/Counties Served: Aiken, Edgefield

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment: Ν

Other Services:

Satellite Location: EDGEFIELD OFFICE Phone:

Address: 1168 BAUSKETT ST

STE A

City: EDGEFIELD State:SC Zip Code: 29824

Satellite Location: WAGENER OFFICE Phone:

Address: 109 RAILROAD AVE

City: WAGENER State:SC Zip Code: 29164

VNA OF GREATER BAMBERG HHA-0045 / 12/31/2015 923 MIDWAY ST Bamberg / Corporation

BAMBERG, SC 29003-1957 FACILITY #:803-245-5611 PO BOX 1048

WEATHERFORD, JENNIFER PH#: 803-245-5611 BAMBERG, SC 29003-1048 VNABAMBERG@YAHOO.COM VNA OF GREATER BAMBERG INC Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

7 **Total Counties Served:**

County/Counties Served: Allendale, Calhoun, Hampton, Orangeburg, Bamberg, Barnwell, Colleton

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: N Home Health Aid: Y Med. Social Services: N

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: SKILLED NURSING

Satellite Location: ORANGEBURG OFFICE Phone:

Address: 1695 CHESTNUT ST NE

State:SC Zip Code: 29116 City: ORANGEBURG

September 4, 2015

Home Health Agencies

DHEC Regulation 61-77

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type **Mailing Address** Licensee

WESLEY COMMONS HOME HEALTH CARE

HHA-0202 / 02/29/2016

1110 MARSHALL RD

Greenwood / Non-Profit Corporation

GREENWOOD, SC 29646-4299 FACILITY #:864-227-7170

1110 MARSHALL RD

MOODY, KIMBERLY H PH#:

GREENWOOD, SC 29646-4299

Facility Email:

KMOODY@WESLEYCOMMONS.ORG

WESLEY COMMONS

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

Abbeville, Edgefield, Greenwood, Laurens, McCormick, Newberry, Saluda, Special Note - SERVING

CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y

Med. Social Services: Y

Home Health Aid: Y

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services:

WESTMINSTER TOWERS HOME HEALTH

HHA-0201 / 01/31/2016

1330 INDIA HOOK RD

York / Non-Profit Corporation

ROCK HILL, SC 29732-2462 FACILITY #:803-328-5000

1330 INDIA HOOK RD

1

STAMPER, AMANDA L PH#: 803-328-5000

ROCK HILL, SC 29732-2462

Facility Email:

MSTAMPER@WESTMINSTERTOWERS.ORG

WESTMINSTER PRESBYTERIAN CENTER INC

Fac. Cont. Email: No Facility Contact Email on Record

Total Counties Served:

County/Counties Served:

York, Special Note - SERVING CAMPUS RESIDENTS ONLY

License Restrictions: SERVING CAMPUS RESIDENTS ONLY

Physical Therapy: N Speech Therapy: N Occupational Therapy: N

Med. Social Services: N

Home Health Aid: N

Medical Supplies/Appliances/Durable Medical Equipment:

Other Services: NURSING

Total Number of Facilities: 84

Total Counties Served:

302